

Work Order ID 104755

July-18-13 7:12:13 AM

104755

Page 1

Item ID: 647.1402

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Lower Cutter Assembly

Stop

NS2

Start Date: 7/18/13 Start Qty: 2.00

2

Required Date: 8/01/13 Req'd Qty: 2.00

2

Reference:

Cust Item ID:

Customer:

Approvals: Process Plan: ML5

Date: 13-07-18 Tooling:

Date:

Run Start

NR1

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr								
----------	--------------	--	--	--	--	--	--	--	--

647.1400	N/C	Pick Kit	0.00						
----------	-----	----------	------	--	--	--	--	--	--

110 *110*

Packaging

Packaging

Memo

0.00

② ③ 13-07-24

120

120

Small Fab

Small Fab

Memo

0.00

Assemble as per dwg and apply loctite 598 on all faying surfaces per note 2.

A/R RTV LOCTITE 598: M125306
exp. date: N/A

② ③ 13-07-24

130

130

QC

Quality Control

QC5- Inspect part completeness to step on W/O

0.00

27

0.00

B. 8

②

DQA: _____ Date: _____

Date:



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS										
			Rework Scrap Use-as-is Suspected Unapproved	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other								
Part No. _____ NCR No. _____															
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector						
Design															
Doc/Data															
Equip/Tooling															
Handling/Pre															
Material															
Operator															
Offset/Setup															
Process															
Supplier															
Training															
Transport															
Unapproved															
FAULT CATEGORY															
Landing Gear			General												
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function							<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence		<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	

Work Order ID 104755

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Page 2

Item ID: 647.1402

Accept

Revision ID:

Item Name: Lower Cutter Assembly

Start Date: 7/18/13 Start Qty: 2.00

2

Required Date: 8/01/13 Req'd Qty: 2.00

2

Reference:

Approvals: Process Plan:

Date: Tooling:

Date:

Run Start

NR1

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

140

Identify as per dwg & Stock Location:

0.00

7/13/13 (2)

140

Packaging

Packaging

Memo

0.00

***IDENTIFY AS PER APICAL MPP-120 BY STAMPING THE P# AND
REV***

150

QC21- Final Inspection - Work Order Release

0.00

MLJ 13-08-08

150

QC

Quality Control

Memo

0.00

PC 13-87

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____

Date: _____

Work Order update only

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS			
Part No. _____	Rework	Scrap	Use-as-is	Skid-tube	Crosstube	Water Jet	Engineering
NCR No. _____	Suspected	Unapproved		Machining	Small Fab	Prod. Eng. Coor.	Quality
				Thermoforming	Finishing	Rec/Store/Packaging	Other
				Large Fab	Composite	Supplier	

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General									
Bending		Bend		Folio/Program		Outside Dimensions		Pressure/Forced		
Centre Not Concentric		BOM/Route		Grain		Over/Under tolerance		Set-up		
Cracks		Broken/Damage/Defect		Hardware		Part Incorrect		Temperature/Cure		
Crimp/Kink/Ripple/Wave		Burrs		Inspection Incomplete/Unqualified		Part Lost/Missing		Weld		
Cuffs		Contamination		Instructions Incomplete/Unclear		Part Moved		Wrong Stock Pulled		
Crushing		Countersink		Misaligned/off center		Positioned Wrong				
Heat Treat		Cut Too Short		Mislabeled		Power Loss/Surge		Other		
Inspection Strip in Tube		Drawing		Misread						
Marks/Chatter		Drill Holes		Off-set						
Turning Sequence		Finish		Out of Calibration						
Wave/Twist in Tube		Fit/Function		Out of Sequence						

Picklist Print

July-18-13 7:12:18 AM

Page 1

Work Order ID: 104755

104755
647 1402

Parent Item: 647.1402

Parent Item Name: Lower Cutter Assembly

Start Date: 7/18/13

Required Date: 8/01/13

Comments: IPP REV:A 12.10.04 NEW ISSUE DD VERF:JLM

Start Qty: 2.00

Required Qty: 2.00

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
646.9701		Manufactured	No				Each	41.0000		2			

✓ *646 9701*

Cutter Sub Assembly

Location

MF
89707
91287
91788
92558

Loc Qty

41

7

20

12

2

Each 15,945.00

12

**

② B 13-07-24

NAS1149FN832P

Purchased

No

Location

ST294
123522
125908
ST510a
125268

Loc Qty

5953

400

5553

9992

9992

Each 2,212.000

6

**

② B 13-07-24

MS27039-08-19

Purchased

No

Location

ST307
123525
ST309
125654
st510
124309

Loc Qty

89

89

923

923

1200

1200

Loc Code

✓ *MS27039-08-19*

Screw

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____	DISPOSITION				AGAINST DEPARTMENT/PROCESS				
Part No. _____	Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____	Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
	Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General			
Bending	Bend <input type="checkbox"/>	Folio/Program <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>
Centre Not Concentric	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Set-up <input type="checkbox"/>
Cracks	Broken/Damage/Defect <input type="checkbox"/>	Hardware <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>
Crimp/Kink/Ripple/Wave	Burrs <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Weld <input type="checkbox"/>
Cuffs	Contamination <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>
Crushing	Countersink <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>	
Heat Treat	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	
Inspection Strip in Tube	Drawing <input type="checkbox"/>	Misread <input type="checkbox"/>		
Marks/Chatter	Drill Holes <input type="checkbox"/>	Off-set <input type="checkbox"/>		
Turning Sequence	Finish <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>		
Wave/Twist in Tube	Fit/Function <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>		

Picklist Print

July-18-13 7:12:18 AM

Page 2

Work Order ID: 104755

104755
647 1402

Parent Item: 647.1402

Parent Item Name: Lower Cutter Assembly

MS210421.08

Purchased

No

✓ *MS210421.08*
Nut

Start Date: 7/18/13

Start Qty: 2.00

Required Date: 8/01/13

Required Qty: 2.00

Each 3.489.000 6

**

(D) 13 07 24

<u>Location</u>	
ST315	1489
122141	3
122452	9
122814	500
123900	977
ST505	2000
	2000
	125445

<u>Loc Qty</u>	<u>Loc Code</u>
1489	
3	
9	
500	
977	
2000	
2000	
125445	

Each 2.0000

**

(D) 13 07 24

647.1501

Manufactured

No

✓ *647 1501*
Lower Deflector Assembly

<u>Location</u>	
ST139C	125082

<u>Loc Qty</u>	<u>Loc Code</u>
2	
2	

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____

Date: _____

Work Order update only

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____	Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
	Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General				
Bending	Bend <input type="checkbox"/>	Folio/Program <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>	
Centre Not Concentric	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Set-up <input type="checkbox"/>	
Cracks	Broken/Damage/Defect <input type="checkbox"/>	Hardware <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>	
Crimp/Kink/Ripple/Wave	Burrs <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Weld <input type="checkbox"/>	
Cuffs	Contamination <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>	
Crushing	Countersink <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>		
Heat Treat	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>	
Inspection Strip in Tube	Drawing <input type="checkbox"/>	Misread <input type="checkbox"/>			
Marks/Chatter	Drill Holes <input type="checkbox"/>	Off-set <input type="checkbox"/>			
Turning Sequence	Finish <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>			
Wave/Twist in Tube	Fit/Function <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>			

APICAL
INDUSTRIES, INC.

PRINTED IN U.S.A. BY THE NATIONAL BUREAU OF STANDARDS | 1911

三

DWG NO. 647.1400

REV: NYC

REARED

J. BEC

| DATE: 06/07/13

EFFECT ON
 INC. UNIN

DWG TITLE: CUTTER ASSY

APPROVED BY

ENG

MFG

G

EFR

NEXT ORDER

TRANSACTION CODES (TC):
A-ADD C-CREATE
R-REVISE D-DELETE

REASON: ADDED CONFIGURATION 64714031 AND INCORPORATED
ECN 02962

EFFI NEXT ORDER

TRANSACTION CODES (TC):
A-ADD C-CREATE
R-REVISE D-DELETE

REASON: ADDED CONFIGURATION 64714031 AND INCORPORATED
ECN 02962

COPY
TO
MAIL
D-COPY
ATTACHMENT
THE
THEIR
~~ST~~ MLJ
13-07-18

8	A	646.9702	1			CUTTER SUB ASSY (U CHANNEL)			
6	R	647.1510	1		1	UPPER DEFLECTOR			
5	R	601.2045	A/R	A/R	A/R	RTV, LOCTITE 598			
4	R	601.1541	3	3	3	NUT		MS21042L08	
3	R	601.2765	3	3	3	SCREW		MS27039-0819	
2	R	601.2764	6	6	6	WASHER		NAS1149FN832P	
C		647.1403	X			CUTTER ASSY (UPPER U CHANNEL)			
F/N	TC	PART NUMBER	.1403	.1402	.1401	DESCRIPTION		MATERIAL	SPECIFICATION
			QTY						
DOCUMENTS EFFECTED:									
<input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRUC <input type="checkbox"/> ICA <input checked="" type="checkbox"/> BOM						CHANGE CATEGORY	DER REVIEW REQUIRED		
						<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
Part No. _____			Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
NCR No. _____											

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

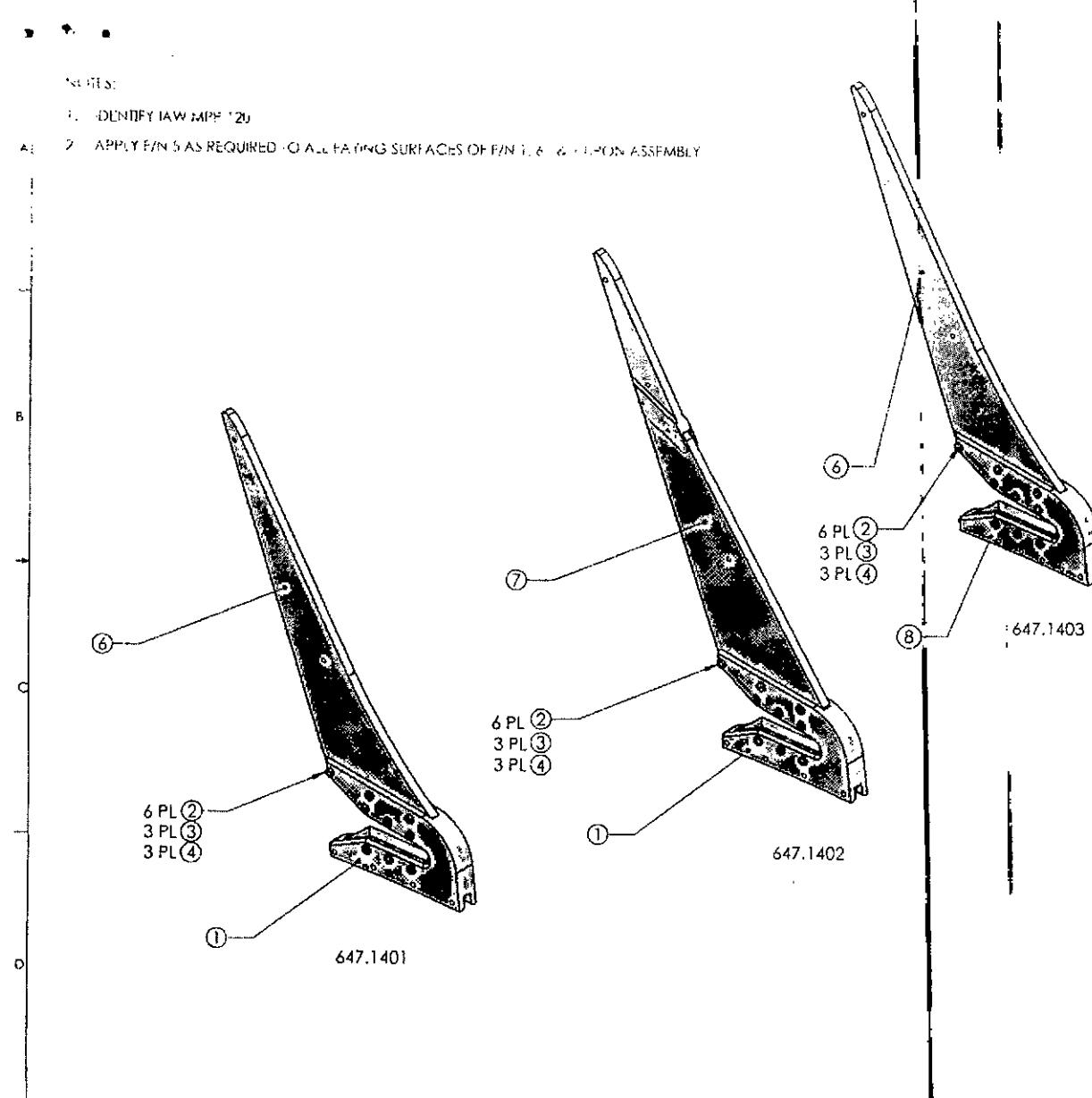
FAULT CATEGORY

Landing Gear	General									
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Folio/Program <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>					
	Centre Not Concentric <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Grain <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Set-up <input type="checkbox"/>					
	Cracks <input type="checkbox"/>	Broken/Damage/Defect <input type="checkbox"/>	Hardware <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>					
	Crimp/Kink/Ripple/Wave <input type="checkbox"/>	Burrs <input type="checkbox"/>	Inspection Incomplete/Unqualified <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Weld <input type="checkbox"/>					
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>					
	Crushing <input type="checkbox"/>	Countersink <input type="checkbox"/>	Misaligned/off center <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>						
	Heat Treat <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>						
	Inspection Strip in Tube <input type="checkbox"/>	Drawing <input type="checkbox"/>	Misread <input type="checkbox"/>		Other <input type="checkbox"/>					
	Marks/Chatter <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Off-set <input type="checkbox"/>							
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>							
	Wave/Twist in Tube <input type="checkbox"/>	Fit/Function <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>							

10495

卷之三

1. IDENTIFY IAW MPW 120
2. APPLY F/N 5 AS REQUIRED TO ALL EXPOSING SURFACES OF F/N 1, 6 & 12 UPON ASSEMBLY



DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____

Date: _____

Work Order update only

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Suspected Unapproved <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear	General									
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Folio/Program	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Pressure/Forced						
<input type="checkbox"/> Centre Not Concentric	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Grain	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Set-up						
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damage/Defect	<input type="checkbox"/> Hardware	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Temperature/Cure						
<input type="checkbox"/> Crimp/Kink/Ripple/Wave	<input type="checkbox"/> Burrs	<input type="checkbox"/> Inspection Incomplete/Unqualified	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Weld						
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Wrong Stock Pulled						
<input type="checkbox"/> Crushing	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misaligned/off center	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Other						
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Power Loss/Surge							
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Drawing	<input type="checkbox"/> Misread								
<input type="checkbox"/> Marks/Chatter	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Off-set								
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Calibration								
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Fit/Function	<input type="checkbox"/> Out of Sequence								